

P.T. 436A

DRAWINGS			CLAIMS ALLOWED	
Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
Assistant Examiner _____ Date _____			NOTICE OF ALLOWANCE MAILED	
Primary Examiner _____ Date _____			ISSUE FEE	
			Amount Due	Date Paid
Legal Instruments Examiner _____ Date _____			ISSUE BATCH NUMBER	